

Sporotrichosis of the Tongue and Pharynx.—DUVERGER and BAIN (*Revue Hebdomadaire de Lar., d'Otol. et de Rhinologie*, April 15, 1911) report a rare case of lingual and pharyngeal sporotrichosis with menacing asphyxia from which cultures were made of the sporothrix *Beurmanni*. The patient was a Syrian lad some fifteen years of age, sent with a diagnosis of double periamygdalian phlegmonitis. The tongue was very much swollen and projected beyond the teeth, and was covered with a thick papiermache-like deposit more than $\frac{1}{2}$ cm. in depth. It had great physical resemblance to that of burns of the tongue from acid, especially of phenic acid. There was edematous enlargement of the buccal floor and the sublingual glands. The mucous membrane of the palate was infiltrated, somewhat pale, milky in spots, and covered with small stellate whitish patches, particularly numerous on the soft palate, the arches, the hard palate, and the pharynx. The tonsils, on the contrary, were but slightly voluminous and presented a very discrete yellowish-white deposit, as also did the internal face of the cheeks. The examination of the larynx was not practicable. There was great difficulty in respiration, in mastication, and in deglutition. As to treatment, the tongue was curetted of a mass of pale yellowish papiermache-like material of a very repulsive and putrid odor. The ulcerated surfaces were touched with strong iodo-iodurated solution, and borooxygenated mouth washes were prescribed, and four grams of iodide of potassium administered daily, under which the patient made a rapid recovery. The sporothrix of Beurmann was recognized under the microscope and cultures made, the results of which are described and depicted in the article which, in addition, gives a summary of what is known of this rare malady.

Menthol in the Nasal Passages Dangerous to Infants.—MAYET (*Revue Hebdomadaire de Lar., d'Otol. et de Rhinol.*, April 22, 1911) has observed two cases of asphyxia from the introduction of mentholated preparations into the nasal passages of infants, and he refers to several similar accidents reported by other writers. He concludes that menthol should be proscribed from infantile therapeutics.

Nasal Neuralgia.—BROECKAERT (*Annales des Mal. de l'Oreille, du Nez et du Pharynx*, Livraison 1, 1911) describes and depicts his method of exposing the branches of the nasal nerves and tearing them from their beds in the successful treatment of this painful affection.

Nasal Diseases following Injuries of the Head.—ZIEM (*Journal of Lar., Rhinol., and Otolaryngology*, March, 1911) expresses his astonishment that so little stress is laid upon the state of the nose and sinuses after injuries to the head. He reports in detail 3 cases in point and refers to several others. In all 3 cases there was a lesion of the right side, but in 1 only was the speech affected, although the patient was right handed. Involvement of the middle ear was present but in 1 case. Injuries to vision occurred in all of them, and various other nervous manifestations, bad dreams among them. Hemorrhage from the mouth and nose and hemilateral anosmia existing in all 3 cases was referred to fracture of the ethmoid. Ultimate nasal obstruc-

tion, due to tumefaction of the mucous membrane, seemed to have been treated with success topically with nasal, intranasal, and ethmoidal douches of salt water.

Bone Cyst of the Ethmoid Cells.—THOMPSON (*The Laryngoscope*, March, 1911) reports a case of a lady who had been annoyed for several months by a very profuse serous discharge from the right nostril when she stooped. This discharge was found to escape from a small opening in the top of carious bone in the wall of the bulla ethmoidalis. The dividing walls of the ethmoid cells had all been destroyed, making one cavity of the lateral mass of the ethmoid bone. This cavity was lined by a thin, white, glistening membrane, the typical cyst lining in appearance. This membrane was curetted lightly, the cavity was packed for twenty-four hours to control hemorrhage, and then removed. A month later it was reported that the only change was that the discharge was now continuous, whereas formerly it had taken place only upon stooping. Inspection of the nose showed a free opening into the cyst with fully two-thirds of the cavity covered with normal membrane. Six weeks later the patient reported entirely well.

Ulceromembranous Laryngitis.—MORE (Revue Hebdomadaire de Laryngologie, d'Otol. et de Rhinol., March 11, 1911) reports and discusses 3 cases, 1 of Reiche, 1 of Arbow Smith, and 1 of his own, in which he identified the affection with the pathological features of Vincent's angina.

Calcined Magnesia in the Treatment of Diffuse Papillomas in the Infant Larynx.—CLAUÉ (*Annales des Mal. de L'Oreille, du Lar., du Nez et du Pharynx*, Livraison 1, 1911) reports two cases of his own and refers to a third in the practice of a friend in which diffuse recurrent papillomas of the larynx, after operation, underwent retrogression under treatment of one-half gram of calcined magnesia daily for a few weeks. He mentions that in veterinary medicine papillomas are very frequent, especially in the mouths of dogs, and the heroic, while empiric remedy is calcined magnesia. (Small doses, three grains each, of sulphate of magnesia have been known to produce similar results.)

Acute Thyroidism following Removal of Thyrolingual Cyst.—DAVIS (*Journal of Laryngology, Rhinology, and Otology*, January, 1911) reports this case. A girl, aged seven years, had a small swelling under the jaw in the middle line which the parents wished removed, as it was a disfigurement. A cyst as large as a grape was found attached to the tongue and hyoid bone, from which it was easily removed entire, the wound sutured with horsehair and closed with collodion. The child became restless in the evening, the temperature rising to 104°, with intermittent and irregular pulse (160 per minute), dilated pupils, and intense facial congestion—signs of acute thyroidism. The neck became swollen and puffy, and continued so for six weeks. The wound healed by first intention. The child complained of no inconvenience beyond "her heart thumping." The disturbance was attributed to leakage of thyroid secretion and its absorption in a wound which was undrained.